Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture	Donald First name  Richard Middle name	First name  Middle name
	identification to your meeting with the trustee.	Glaspell, III  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1405	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	317 North Elevator Road Linwood, MI 48634  Number, Street, City, State & ZIP Code  Bay  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Dec	otor 1 Donald Richard G	laspell, II	l			Case	number (if known)	
Dor	Tall the Court About )	/aux Bank	www.co					
Par 7.	The chapter of the	Check on	e. (For a b	orief description of each, see			.C. § 342(b) for Individu	uals Filing for Bankruptcy
	Bankruptcy Code you are choosing to file under	<u>`</u>	,, ,	go to the top of page 1 and o	check the	appropriate box.		
	Ū	☐ Chapt						
		☐ Chapt						
		☐ Chapt	ter 12					
		■ Chapt	ter 13					
8.	How you will pay the fee	abo ord	out how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	, cashier's check, or money
		☐ Ine	ed to pay	the fee in installments. If y		e this option, sigr	and attach the Applica	ation for Individuals to Pay
			•	e in Installments (Official For	,	this satism salvi	f and filling for Obser	stan 7. De lavo a fordera mano
		but app	is not requolies to you	t my fee be waived (You ma uired to, waive your fee, and our family size and you are una on to Have the Chapter 7 Filin	may do so able to pay	o only if your inco y the fee in instal	me is less than 150% of ments). If you choose	of the official poverty line that this option, you must fill out
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.						
	•			Eastern District of				
			District	Michigan	When	2/13/15	Case number	15-20246
			District		_ When		Case number	
			District		_ When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	rou
			District		_ When		Case number, if	known
			Debtor				Relationship to y	rou
			District		_ When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ine 12.				
	residence:	☐ Yes.	Has yo	ur landlord obtained an evicti	on judgm	ent against you a	nd do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

J 0 0	Donald Richard G	iaspeii, i			Case Humber (II Mount)	
Par	3: Report About Any Bu	sinesses	You Own as	a Sole Propriet	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Par	rt 4.		
		☐ Yes.	Name an	d location of bus	usiness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number,	Street, City, Stat	ate & ZIP Code	
	it to this petition.		Check the	e appropriate bo	oox to describe your business:	
			□ н	ealth Care Busin	siness (as defined in 11 U.S.C. § 101(27A))	
			□ S	ingle Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))	
			□ Si	tockbroker (as d	defined in 11 U.S.C. § 101(53A))	
			□ C	ommodity Broke	ser (as defined in 11 U.S.C. § 101(6))	
			□ N	one of the above	ve	
13.	Are you filing under		e filing under	Chapter 11, the	e court must know whether you are a small business debtor so that it can set appropriate	
	Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	operation		statement, and f	e a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedur	
	debtor?	■ No.	I am not f	iling under Chap	apter 11.	
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	under Chapter	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	,
		☐ Yes.	I am filing	under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Cod	e.
ar	t 4: Report if You Own or	Have An	/ Hazardous	Property or Any	ny Property That Needs Immediate Attention	
	Do you own or have any	■ No.	,		.,,,,,	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the	hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			e attention is y is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where is the	e property?		
	urgent repairs?					
					Number, Street, City, State & Zip Code	

### Explain Your Efforts to Receive a Briefing About Credit Counseling

## 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Donald Richard G	laspell, III		Case numb	Der (if known)
Par	6: Answer These Quest	ions for Re	porting Purposes		
16.	What kind of debts do you have?			onsumer debts? Consumer debts are de sonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
				usiness debts? Business debts are debts estment or through the operation of the bu	
			□ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
				owe that are not consumer debts or busine	ess debts
		-	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	r 7. Go to line 18.	
	Do you estimate that after any exempt			Do you estimate that after any exempt provailable to distribute to unsecured creditors	pperty is excluded and administrative expenses s?
	property is excluded and administrative expenses		□ No		
	are paid that funds will be available for		□ Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	<b>■</b> 1-49		☐ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	<b>5</b> 0,001-100,000
		100-19		☐ 10,001-25,000	☐ More than100,000
		200-99	9		
19.	How much do you estimate your assets to	<b>\$0 - \$5</b>	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	be worth?		1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$5	0.000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities		1 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	to be?		01 - \$500,000	□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion
		□ \$500,0	01 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	7: Sign Below				
For	you	I have exa	mined this petition, and I dec	clare under penalty of perjury that the info	rmation provided is true and correct.
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I c	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
				not pay or agree to pay someone who is r ne notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I request r	elief in accordance with the	chapter of title 11, United States Code, sp	ecified in this petition.
		bankruptcy and 3571.	/ case can result in fines up	, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Donald F	d Richard Glaspell, III Richard Glaspell, III of Debtor 1	Signature of Debt	tor 2
		Executed	on September 27, 2016	Executed on	
			MM / DD / YYYY		M / DD / YYYY

Debtor 1	Donald Richard G	laspell, III	Case number (if known)	
For your a	attorney, if you are	I, the attorney for the debtor(s) named in this petitio	n, declare that I have informed the debtor	s) about eligibility to proceed

represented by one

If you are not represented by an attorney, you do not need to file this page.

under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joshua M. Reinert	Date	September 27, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Joshua M. Reinert		
Printed name		
Reinert & Reinert		
Firm name		
3434 Davenport		
Saginaw, MI 48602		
Number, Street, City, State & ZIP Code		
Contact phone (989) 799-8860	Email address	ecf@mcreinert.com
P66185		
Bar number & State		

Certificate Number: 15317-MIE-CC-027696770



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on July 4, 2016, at 4:02 o'clock PM PDT, Donald R Glaspell received from Access Counseling, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of Michigan, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: July 4, 2016

By: /s/Annie Gandeza

Name: Annie Gandeza

Title:

Certified Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

	n this information to identify your case:				
Deb	tor 1 Donald Richard Glaspe First Name	Middle Name	Last Name		
	tor 2 se if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the: EAS	STERN DISTRICT OF M	ICHIGAN		
Cas	e number				
(if kno					ck if this is an ended filing
	icial Form 106Sum				
Be a	s complete and accurate as possible. If to mation. Fill out all of your schedules firs original forms, you must fill out a new S	wo married people are t; then complete the in	Certain Statistical Information filing together, both are equally responsible formation on this form. If you are filing amend box at the top of this page.	for supply	
ran	Juninarize Tour Assets				
					assets of what you own
1.	Schedule A/B: Property (Official Form 10 1a. Copy line 55, Total real estate, from Sc	6A/B) chedule A/B		\$	30,000.00
	1b. Copy line 62, Total personal property, f	rom Schedule A/B		\$	1,556.54
	1c. Copy line 63, Total of all property on So	chedule A/B		\$	31,556.54
Part	2: Summarize Your Liabilities				
					liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims S 2a. Copy the total you listed in Column A,		icial Form 106D) ottom of the last page of Part 1 of <i>Schedule D.</i>	\$	84,358.83
3.	Schedule E/F: Creditors Who Have Unsec 3a. Copy the total claims from Part 1 (prio		m 106E/F) om line 6e of <i>Schedule E/F</i>	. \$	0.00
	3b. Copy the total claims from Part 2 (non	priority unsecured claims	s) from line 6j of Schedule E/F	. \$	16,904.37
			Your total liabilitie	s \$	101,263.20
Part	3: Summarize Your Income and Expen	nses			
4.	Schedule I: Your Income (Official Form 100 Copy your combined monthly income from			\$	2,773.91
5.	Schedule J: Your Expenses (Official Form Copy your monthly expenses from line 22cd			\$	2,148.91
Part	4: Answer These Questions for Admir	nistrative and Statistica	al Records		
6.	Are you filing for bankruptcy under Cha ☐ No. You have nothing to report on this	•	this box and submit this form to the court with	your other s	chedules.
7.	■ Yes What kind of debt do you have?				
	■ Your debts are primarily consumer	debts. Consumer debts	s are those "incurred by an individual primarily f	or a person	al, family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,788.30

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	in this informatior	າ to identify	your case and th	nis filing:			
Deb			ard Glaspell, III				
Doh	Firs tor 2	st Name	Middle	e Name Last Name			
		st Name	Middle	Name Last Name			
Unit	ed States Bankrupt	tcy Court for	the: EASTERN	DISTRICT OF MICHIGAN			
Cas	e number						☐ Check if this is an amended filing
<b>○</b> tt	::a:a!	4004/5	,				
_	icial Form		_				
	hedule A			an asset only once. If an asset fits in more than o			12/15
Answ Part	er every question.  1: Describe Each F	Residence, B	uilding, Land, or Ot	her Real Estate You Own or Have an Interest In			
1. <b>D</b> c	you own or have ar	ny legal or ed	quitable interest in a	any residence, building, land, or similar property?			
	No. Go to Part 2.						
	Yes. Where is the pr	roperty?					
1.1	317 North Elev Street address, if availa		scription	What is the property? Check all that apply  Single-family home  Duplex or multi-unit building	the amount of a	ny secured	ims or exemptions. Put claims on Schedule D: as Secured by Property.
1.1			scription	Single-family home	the amount of an Creditors Who F	ny secured Have Claim	claims on Schedule D: as Secured by Property.
1.1			scription 48634-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of a	ny secured Have Claim of the	claims on Schedule D:
1.1	Street address, if availa	ble, or other des		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property	the amount of an Creditors Who F	ny secured Have Claim of the ?	claims on Schedule D: s Secured by Property.  Current value of the portion you own?
1.1	Street address, if availa	ble, or other des	48634-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	Current value centire property \$30,0  Describe the na	ny secured Have Claim of the ? 00.00 ature of yo	Current value of the portion you own? \$30,000.00
1.1	Street address, if availa	ble, or other des	48634-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current value centire property \$30,0  Describe the nation (such as fee sin a life estate), if	ny secured Have Claim of the ? 00.00 ature of your mple, tena known.	claims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$30,000.00
1.1	Street address, if availa  Linwood  City	ble, or other des	48634-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only	Current value centire property \$30,0  Describe the na (such as fee sin	ny secured Have Claim of the ? 00.00 ature of your mple, tena known.	Current value of the portion you own? \$30,000.00
1.1	Street address, if availa	ble, or other des	48634-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value centire property \$30,0  Describe the nation (such as fee sin a life estate), if	ny secured Have Claim of the ? 00.00 ature of your mple, tena known.	Current value of the portion you own? \$30,000.00
1.1	Street address, if availa  Linwood  City  Bay	ble, or other des	48634-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only	Current value centire property \$30,0  Describe the na (such as fee sin a life estate), if Joint tenant	of the ? 00.00 ature of your pole, tena known.	Current value of the portion you own? \$30,000.00
1.1	Street address, if availa  Linwood  City  Bay	ble, or other des	48634-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value centire property \$30,0  Describe the na (such as fee sin a life estate), if  Joint tenant	of the ? 00.00 ature of your pole, tena known.	Current value of the portion you own? \$30,000.00  our ownership interest incy by the entireties, or
1.1	Street address, if availa  Linwood  City  Bay	ble, or other des	48634-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this i	Current value centire property \$30,0  Describe the na (such as fee sin a life estate), if  Joint tenant	of the ? 00.00 ature of your pole, tena known.	Current value of the portion you own? \$30,000.00  our ownership interest incy by the entireties, or
1.1	Street address, if availa  Linwood  City  Bay	ble, or other des	48634-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this i property identification number:	Current value centire property \$30,0  Describe the na (such as fee sin a life estate), if  Joint tenant	of the ? 00.00 ature of your pole, tena known.	Current value of the portion you own? \$30,000.00  our ownership interest incy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 <b>D</b>	onald Richa	rd Glaspell, III		Case number (if known)	
3. <b>C</b> a	ars, vans,	trucks, tracto	rs, sport utility vel	hicles, motorcycles		
П	No					
	Yes					
	100					
3.1	Make:	Dodge		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Caravan		■ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2005		Debtor 2 only	Current value of t	
	Approxin	nate mileage:	237,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:		$\square$ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$500	\$500.00
				(ccc instruction)		
Ex				d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc		
				n for all of your entries from Part 2, including that number here		\$500.00
Part			al and Household Ite			
Do y	ou own o	or have any leg	gal or equitable int	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	xamples:   ] No -	,		, china, kitchenware		
	Yes. De	scribe				
			Household furn	iture, furnishings and appliances.		\$708.00
		Televisions and		eo, stereo, and digital equipment; computers, pr nedia players, games	inters, scanners; music c	ollections; electronic devices
	] No	moldaling con p	nones, cameras, m	icula players, games		
_	Yes. De	scribe				
		-				
			2-Televisions ar	nd 1-DVD player		\$58.00
E		Antiques and fig	gurines; paintings, s, memorabilia, col	prints, or other artwork; books, pictures, or other llectibles	r art objects; stamp, coin,	or baseball card collections;
	Yes. De	scribe				
E	xamples:	musical instrun	aphic, exercise, an	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	and kayaks; carpentry tools;
	Yes. De	scribe				
		Γ	Bike			\$15.00

Official Form 106A/B Schedule A/B: Property page 2

Debtor	Donald Rich	nard Glaspell, III	Cas	se number (if known)	
_	amples: Pistols, rifle	s, shotguns, ammunition, and	related equipment		
■ N	lo 'es. Describe				
11. <b>Clo</b> <i>Ex</i>	amples: Everyday cl	othes, furs, leather coats, des	gner wear, shoes, accessories		
■ Y	es. Describe				
		Personal Clothing			\$40.00
■ N	amples: Everyday je	welry, costume jewelry, engaç	ement rings, wedding rings, heirloom jewel	ry, watches, gems, go	d, silver
-	n-farm animals amples: Dogs, cats, lo	birds, horses			
ΠY	es. Describe				
■ N	lo	·	not already list, including any health aids	s you did not list	
<b>Ц</b> 1	es. Give specific inf	ormation		-	
		-	art 3, including any entries for pages you	have attached	\$821.00
	Describe Your Finan				
Do you	u own or have any I	egal or equitable interest in	any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>Cas</b> <i>Ex</i> ■ N □ Y	amples: Money you lo	have in your wallet, in your ho	me, in a safe deposit box, and on hand whe	en you file your petitior	
			unts; certificates of deposit; shares in credit with the same institution, list each.	unions, brokerage ho	uses, and other similar
□ N ■ Y	lo ′es		Institution name:		
		17.1. Checking	First Merit Bank		\$235.54
_Ex	amples: Bond funds	or publicly traded stocks , investment accounts with bro	kerage firms, money market accounts		
■ N □ Y	lo 'es	Institution or issuer i	name:		
joi	nt venture	tock and interests in incorpo	orated and unincorporated businesses, in	ncluding an interest	n an LLC, partnership, and
■ N		formation about them			
_ '	<b>- - - - -</b>	Name of entity:		of ownership:	

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Donald Richard Glaspell, III	C	Case number (if known)	
20.	Negoti	ment and corporate bonds and other negotiab able instruments include personal checks, cashier egotiable instruments are those you cannot transfe	s' checks, promissory notes, and mon	ney orders.	
	☐ Yes.	Give specific information about them Issuer name:			
	Examp ■ No	nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(k	o), thrift savings accounts, or other per	nsion or profit-sharing plans	
	☐ Yes.	ist each account separately.  Type of account:	Institution name:		
22.	Your s	y deposits and prepayments nare of all unused deposits you have made so that les: Agreements with landlords, prepaid rent, publ			or others
			Institution name or individual:		
23.	Annuit ■ No	es (A contract for a periodic payment of money to	you, either for life or for a number of	years)	
	☐ Yes	Issuer name and description.			
24.		s in an education IRA, in an account in a qualif C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ied ABLE program, or under a qual	lified state tuition program	<b>1.</b>
	☐ Yes	Institution name and description. Se	eparately file the records of any interes	sts.11 U.S.C. § 521(c):	
	■ No	equitable or future interests in property (other	than anything listed in line 1), and	rights or powers exercisa	ble for your benefit
26.		s, copyrights, trademarks, trade secrets, and or les: Internet domain names, websites, proceeds fr		ts	
	☐ Yes.	Give specific information about them			
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperat	ive association holdings, liquor license	es, professional licenses	
	☐ Yes.	Give specific information about them			
M	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you			
	☐ Yes.	Give specific information about them, including wh	ether you already filed the returns and	d the tax years	
29.	Family Examp ■ No	support les: Past due or lump sum alimony, spousal suppo	ort, child support, maintenance, divorc	ce settlement, property settle	ement
	☐ Yes.	Give specific information			
30.	Examp	mounts someone owes you  les: Unpaid wages, disability insurance payments, benefits; unpaid loans you made to someone		pay, workers' compensatio	n, Social Security
	■ No □ Yes.	Give specific information			

Schedule A/B: Property Official Form 106A/B page 4

Debtor 1 Donald Richard Glaspell, III	Case number (if known)	
31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credi	it, homeowner's, or renter's insura	nce
☐ Yes. Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
<ul> <li>32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance po someone has died. ■ No □ Yes. Give specific information</li> </ul>	olicy, or are currently entitled to rec	eive property because
<ul> <li>33. Claims against third parties, whether or not you have filed a lawsuit or made Examples: Accidents, employment disputes, insurance claims, or rights to sue</li> <li>■ No</li> <li>□ Yes. Describe each claim</li> </ul>	a demand for payment	
34. Other contingent and unliquidated claims of every nature, including countered ■ No □ Yes. Describe each claim	claims of the debtor and rights to	o set off claims
35. Any financial assets you did not already list  ■ No □ Yes. Give specific information		
36. Add the dollar value of all of your entries from Part 4, including any entries for Part 4. Write that number here	. •	\$235.54
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any r	real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?  No. Go to Part 6.		
☐ Yes. Go to line 38.		
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	n Interest In.	
46. Do you own or have any legal or equitable interest in any farm- or commercia  ■ No. Go to Part 7.	al fishing-related property?	
☐ Yes. Go to line 47.		
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Al	bove	
<ul><li>53. Do you have other property of any kind you did not already list?</li></ul>		
☐ Yes. Give specific information		
54. Add the dollar value of all of your entries from Part 7. Write that number her	'e	\$0.00

\$31,556.54

63. Total of all property on Schedule A/B. Add line 55 + line 62

Debtor 1	Donald Richar	rd Glaspell, III		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jilled States B	ankruptcy Court for th	ne: EASTERN DISTRICT O	F MICHIGAN	
Case number				☐ Check if this is ar

# Schedule C: The Property You Claim as Exempt

Part 1: Identify the Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	? Check one only, eve	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	317 North Elevator Road Linwood, MI 48634 Bay County	\$30,000.00		\$0.00	11 U.S.C. § 522(d)(1)
	debtor's residence Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2005 Dodge Caravan 237,000 miles Line from Schedule A/B: 3.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(2)
				100% of fair market value, up to any applicable statutory limit	
	Household furniture, furnishings and appliances.	\$708.00		\$708.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
	2-Televisions and 1-DVD player Line from Schedule A/B: 7.1	\$58.00		\$58.00	11 U.S.C. § 522(d)(3)
	Line Irom Schedule A.B. 111			100% of fair market value, up to any applicable statutory limit	
	Bike Line from Schedule A/B: 9.1	\$15.00		\$15.00	11 U.S.C. § 522(d)(5)
	Line from Scriedule A/D. 3.1			100% of fair market value, up to any applicable statutory limit	

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Personal Clothing Line from Schedule A/B: 11.1	\$40.00		\$40.00	11 U.S.C. § 522(d)(3)
'	Life from Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
	Checking: First Merit Bank Line from Schedule A/B: 17.1	\$235.54		\$235.54	11 U.S.C. § 522(d)(5)
'	Life Holli Schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustme	nt.)
!	Yes. Did you acquire the property covered	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Fill in this information	to identify you	r case:			
	onald Richard	Glaspell, III  Middle Name  Last Nam	ne	-	
Debtor 2 (Spouse if, filing) Firs	t Name	Middle Name Last Nam	ne	-	
United States Bankrupt	cy Court for the:	EASTERN DISTRICT OF MICHIGAN		-	
Case number					if this is an ded filing
Official Form 10	<u>6D</u>				
Schedule D: 0	Creditors	Who Have Claims Secu	red by Propert	У	12/15
		f two married people are filing together, both a ut, number the entries, and attach it to this for			
1. Do any creditors have o	claims secured by	your property?			
☐ No. Check this b	ox and submit th	is form to the court with your other schedule	es. You have nothing else	to report on this form.	
■ Yes. Fill in all of	the information b	pelow.	_	·	
Part 1: List All Secu					
		nore than one secured claim, list the creditor sepa	Column A	Column B	Column C
for each claim. If more that	n one creditor has	a particular claim, list the other creditors in Part 2. all order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Citimortgage		Describe the property that secures the claim:	*	\$30,000.00	\$18,431.47
Creditor's Name  P.O. Box 6243		317 North Elevator Road Linwood, MI 48634 Bay County debtor's residence			
Sioux Falls, SD	)	As of the date you file, the claim is: Check all th apply.	at		
57117-6243		Contingent			
Number, Street, City, St	tate & Zip Code	☐ Unliquidated			
Who owes the debt? Cr	neck one.	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage car loan)	or secured		
Debtor 2 only		_ ′			
Debtor 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
☐ At least one of the debt☐ Check if this claim rel		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Mortga	ge		
Date debt was incurred	10/02	Last 4 digits of account number 28	373		
2.2 Huntington Na	tional	Describe the managery that accounts the eleimon	\$35,927.36	\$30,000.00	\$35,927.36
Creditor's Name		Describe the property that secures the claim: 317 North Elevator Road Linwood, MI 48634 Bay County	φ33,327.30	<b>— \$30,000.00</b>	<del>- 433,921.30</del>
P.O. Box 1558		debtor's residence			
Columbus, OH		As of the date you file, the claim is: Check all th	at		
43216-1558		apply.  Contingent			
Number, Street, City, St	tate & Zip Code	Unliquidated			
Who owes the debt? Ch	neck one.	Disputed  Nature of lien. Check all that apply.			
☐ Debtor 1 only		☐ An agreement you made (such as mortgage of	or secured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	only	$\square$ Statutory lien (such as tax lien, mechanic's lie	en)		
At least one of the debt	tors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim rel community debt	lates to a	Other (including a right to offset)  Second	d Mortgage		
Date debt was incurred	10/08	Last 4 digits of account number 43	51		

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Official Form 106D

Debtor	Donald Rich	ard Glaspell, III		Case number (if know)
	First Name	Middle Name	Last Name	
	•		this page. Write that number he	ere: \$84,358.83
	is the last page of y hat number here:	our form, add the dollar va	liue totals from all pages.	\$84,358.83
Part 2:	List Others to E	se Notified for a Debt Th	at You Already Listed	
trying to	collect from you for creditor for any of	or a debt you owe to someo	one else, list the creditor in Part	t that you already listed in Part 1. For example, if a collection agency is t 1, and then list the collection agency here. Similarly, if you have more litors here. If you do not have additional persons to be notified for any
	ame, Number, Stree	t, City, State & Zip Code		On which line in Part 1 did you enter the creditor?
-	.O. Box 0049 alatine, IL 6005	55		Last 4 digits of account number
	ame, Number, Stree	t, City, State & Zip Code		On which line in Part 1 did you enter the creditor? _2.2
H 4	he Huntington luntington Cen 1 S. High St. columbus, OH 4			Last 4 digits of account number

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in t	his inform	nation to identify your cas	se:					
Debtor	1	Donald Richard Gla						
Debtor	0	First Name	Middle Name	Last Name				
(Spouse it	_	First Name	Middle Name	Last Name				
United	States Bar	nkruptcy Court for the:	ASTERN DISTRICT C	F MICHIGAN				
Case n	umher							
(if known)							] Check if th	nis is an
							amended	filing
Officia	al Form	n 106E/F						
		/F: Creditors Wh	o Have Unsecu	red Claims				12/15
any exect Schedule Schedule left. Attac name an	eutory control Guide G: Execut Control Guide	accurate as possible. Use Fracts or unexpired leases that ory Contracts and Unexpired fors Who Have Claims Secure tinuation Page to this page. Inber (if known).	it could result in a claim I Leases (Official Form 1 d by Property. If more s f you have no informatio	. Also list executory con 106G). Do not include an pace is needed, copy the	ntracts on Schedule A/B y creditors with partiall Part you need, fill it ou	: Property (O y secured cla t, number the	official Form 1 nims that are I de entries in the	06A/B) and on isted in e boxes on the
Part 1:		l of Your PRIORITY Unse						
	any credito No. Go to Pa	rs have priority unsecured c	aims against you?					
■,		ait Z.						
Part	t 1. If more t	e claims in alphabetical order a han one creditor holds a partic ttion of each type of claim, see	ular claim, list the other cr	editors in Part 3.	, ,	Priority amount	No	onpriority nount
2.1		n Department of Treas	ury Last 4 digits o	f account number	\$0.0	00	\$0.00	\$0.00
	P.O. Box		When was the	debt incurred?				
		reet City State Zlp Code	As of the date	you file, the claim is: Ch	eck all that apply			
WI		I the debt? Check one.	☐ Contingent	y cae, and ena ier on	ook all that apply			
	Debtor 1 o	nly	☐ Unliquidated	d				
	Debtor 2 or	nly	☐ Disputed					
	Debtor 1 a	nd Debtor 2 only	Type of PRIOR	ITY unsecured claim:				
	At least on	e of the debtors and another	☐ Domestic su	upport obligations				
	Check if the	his claim is for a community	debt Taxes and o	certain other debts you ow	e the government			
		ubject to offset?	☐ Claims for d	eath or personal injury wh	ile you were intoxicated			
	No No		☐ Other. Spec					
Ш	Yes			notice purpose	S			
Part 2:	List Al	l of Your NONPRIORITY	Insecured Claims					
3. Do a	any credito	rs have nonpriority unsecur	ed claims against you?					
	No. You hav	ve nothing to report in this part.	Submit this form to the co	ourt with your other schedu	ıles.			
	Yes.							
unse	ecured clain one credito	nonpriority unsecured claim n, list the creditor separately fo or holds a particular claim, list t	r each claim. For each cla	im listed, identify what type	e of claim it is. Do not list	claims alread	y included in P	art 1. If more

Total claim

Advanced Disancetic Imaging D.C	Last 4 digits of account number	1606	£400 f
Advanced Diagnostic Imaging, P.C. Nonpriority Creditor's Name	Last 4 digits of account number	1606	\$180.34
P.O. Box 5987	When was the debt incurred?	12/15	
Saginaw, MI 48603-0987  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,	or o	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify services		
Bangor Medical Center	Last 4 digits of account number	2627	\$80.
Nonpriority Creditor's Name 2520 N. Euclid	When was the debt incurred?	9/13	
Bay City, MI 48706	when was the dept incurred?	3/13	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other Specify services		
Byram Healthcare	Last 4 digits of account number	6366	\$375.2
Nonpriority Creditor's Name			• • • •
3010 Woodcreek Drive, Suite A Downers Grove, IL 60515	When was the debt incurred?	12/15	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
■ No □ Yes	Other. Specify services	g plane, and other similal debts	

Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6779	\$589.0
P.O. Box 30281 Salt Lake City, UT 84130-0281	When was the debt incurred?	1/12	
Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
No	Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other. Specify credit card p	ourchases	
Covenant	Last 4 digits of account number	4364	\$1,453.1
Nonpriority Creditor's Name	When was the debt incurred?	1/16	
Saginaw, MI 48602	-		
Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community lebt	☐ Student loans		
s the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
I No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
☐ Yes	Other. Specify services	· 	
Covenant Healthcare	Last 4 digits of account number	1563	\$11,397.4
lonpriority Creditor's Name 447 N. Harrison	When was the debt incurred?	12/15	
Saginaw, MI 48602 Number Street City State Zlp Code	As of the date you file the claim is	Charle all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is	. Спеск ан тпат арргу	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separa	ation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	·	
No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
☐ Yes	Other. Specify services		

Dr. Dolonionde Korrelor MD	Last Adiates of control of	2200	6040.00			
Dr. Palaniandy Kogulan, MD Nonpriority Creditor's Name	Last 4 digits of account number	3300	\$342.00			
3785 Bay Road Saginaw, MI 48603	When was the debt incurred?	12/15				
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
No	Debts to pension or profit-sharin	g plans, and other similar debts				
☐ Yes	Other. Specify services					
EM Med PC	Last 4 digits of account number	1897	\$601.00			
Nonpriority Creditor's Name	_					
P.O. Box 12750 Oklahoma City, OK 73157	When was the debt incurred?	1/13				
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt		ration agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims					
No	Debts to pension or profit-sharin	g plans, and other similar debts				
Yes	Other. Specify services					
EM Med PC	Last 4 digits of account number	0719	\$601.00			
Nonpriority Creditor's Name P.O. Box 12750 Oklahoma City, OK 73157	When was the debt incurred?	3/13				
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
☐Yes	Other. Specify services					

Flint Clinical Pathology Nonpriority Creditor's Name 3490 Calkin Rd  Last 4 digits of account number When was the debt incurred?  1/13	\$125.00
Nonpriority Creditor's Name  3490 Calkin Rd When was the debt incurred? 1/13	\$125.00
3490 Calkin Rd When was the debt incurred? 1/13	
Flint, MI 48532	
Number Street City State Zlp Code  As of the date you file, the claim is: Check all that ap	ply
Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or report as priority claims	r divorce that you did not
■ No □ Debts to pension or profit-sharing plans, and other s	similar debts
☐ Yes ☐ Other. Specify services	
4.1   Freeland Foot & Ankle	\$1,059.28
Nonpriority Creditor's Name	
7305 Midland Road Ste 2 When was the debt incurred? 1/16 Freeland, MI 48623	
Number Street City State Zlp Code  As of the date you file, the claim is: Check all that ap	ply
Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement of	divorce that you did not
Is the claim subject to offset? report as priority claims  ■ No □ Debts to pension or profit-sharing plans, and other s	imilar dahta
	armiar debis
☐ Yes ☐ Other. Specify _ services	
4.1 Oakland Orthopedic Last 4 digits of account number 9063	\$101.00
Nonpriority Creditor's Name 2456 22nd Street When was the debt incurred?  Bay City, MI 48708  **Nonpriority Creditor's Name  When was the debt incurred?  8/13	
Number Street City State Zlp Code  As of the date you file, the claim is: Check all that ap	ply
Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or Is the claim subject to offset? report as priority claims	divorce that you did not
■ No □ Debts to pension or profit-sharing plans, and other s	similar debts
☐ Yes ☐ Other. Specify _ services	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Donald Richard Glaspell, III		Case number (if know)
Byram Healthcare 120 Bloomindale Road, Suite 301 White Plains, NY 10605-1518	Line 4.3 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Willie Flams, NT 10005-1516	Last 4 digits of account number	
Name and Address CBC Credit Services P.O. Box 3244	On which entry in Part 1 or Part 2 did y Line <b>4.6</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
Saginaw, MI 48605	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Covenant Healthcare	On which entry in Part 1 or Part 2 did y Line 4.5 of ( <i>Check one</i> ):	rou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims
P.O. Box 24807 Nashville, TN 37202	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
Covenant Medical Center	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
P.O. Box 771799 Detroit, MI 48277		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Credit Service of Michigan P.O. Box 6428	Line <u>4.12</u> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims
Saginaw, MI 48608		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Credit Services of Michigan 1982 Hemmeter	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Saginaw, MI 48638		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Credit Services of Michigan, Inc. P.O. Box 6428	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Saginaw, MI 48608		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Money Recovery Nationwide 8155 Executive Court, Suite 10	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Lansing, MI 48917		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Money Recovery Nationwide 8155 Executive Court, Suite 10	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Lansing, MI 48917		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	· · · · · · · · · · · · · · · · · · ·
Russel Collection G3285 Van Slyke Rd.	Line <b>4.10</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims
Flint, MI 48507		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type of	Unsecured Claim	
		al reporting purposes only. 28 U.S.C. §159. Add the amounts for each
6- 8		Total Claim
6a. Domestic support obligati Total claims	ons	6a. \$ <u>0.00</u>

Official Form 106 E/F

from Part 1

6b.

6c.

6b. Taxes and certain other debts you owe the government

6c. Claims for death or personal injury while you were intoxicated

0.00

0.00

#### Debtor 1 Donald Richard Glaspell, III Case number (if know) Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f. Student loans 6f. 0.00 Total claims from Part 2 6g. Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 6i. 16,904.37 Total Nonpriority. Add lines 6f through 6i. 6j. 16,904.37 6j.

Fill in this infor					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF MICHIGAN		
Case number _				☐ Check if this is an amended filing	

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olato	Zii Godo	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	Oity		Olate	Zii Gode	
	Name				_
	Number	Street			<u> </u>
	-				
<u> </u>	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Fill in Abi	- i.e.f ti ti tife					
Debtor 1	s information to identify your o	ilaspell, III				
Debtor 2 (Spouse if, fi	First Name  First Name	Middle Name  Middle Name	Last Name			
	ates Bankruptcy Court for the:	EASTERN DISTRICT OF				
Case nun	nber				☐ Check if the ch	
	al Form 106H dule H: Your Cod	ebtors				12/15
people ar fill it out, your nam	s are people or entities who are efiling together, both are equations and number the entries in the e and case number (if known).	ally responsible for suppl boxes on the left. Attach . Answer every question.	lying correct informatio the Additional Page to	n. If more space is r this page. On the to	needed, copy the Ado	ditional Page,
□ No ■ Ye		ou are illing a joint case, d	o not list either spouse a	s a codebior.		
	thin the last 8 years, have you na, California, Idaho, Louisiana,					s include
	o. Go to line 3. es. Did your spouse, former spou	ise, or legal equivalent live	with you at the time?			
in lin Form	olumn 1, list all of your codebt le 2 again as a codebtor only it n 106D), Schedule E/F (Official Column 2.	that person is a guarant	or or cosigner. Make su	ire you have listed t	he creditor on Sched	dule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Zli	P Code		Column 2: The cre Check all schedule	editor to whom you o	owe the debt
3.1	Traci Delgado 423 E. Portage Avenue Sault Sainte Marie, MI 497	83		■ Schedule D, I □ Schedule E/F □ Schedule G _ Huntington Nat	, line	

Official Form 106H Schedule H: Your Codebtors Page 1 of 1
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Page 1 of 1
Best Case Bankruptcy
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E.11	to the total and a second second					1			
	in this information to identify your cotor 1  Donald Rich								
Dei	Donaid Rici	nard Glaspell, III			_				
	otor 2				_				
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF MICHIGAN						
_	se number		-			Check if th	is is:		
(If kr	nown)					☐ An am	ended filing		
								ing postpetition of following date:	chapter
<u>O</u>	fficial Form 106l					MM / E	DD/ YYYY		
S	chedule I: Your Inc	ome							12/15
Par	use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment								
1.	Fill in your employment information.		Debtor 1			Deb	tor 2 or non-	filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			■ E	Employed		
	information about additional	,,	☐ Not employed				lot employed		
	employers.	Occupation	Truck Driver						
	Include part-time, seasonal, or self-employed work.	Employer's name	Billy's Contracti	ing Inc					
	Occupation may include student or homemaker, if it applies.	Employer's address	6950 N. Michiga Saginaw, MI 486						
		How long employed to	here? 1.5 year	rs					
Pai	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any l	line, write \$0 ir	n the space. I	nclude your non-	-filing
-	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all	emplo	oyers for that p	person on the	lines below. If yo	ou need
						For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,500.	.47 \$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.	.00_ +\$	0.00	

Calculate gross Income. Add line 2 + line 3.

0.00

3,500.47

Case number (if known)

			For	Debtor 1	For Debtor 2 or non-filing spouse			
	Copy line 4 here	4.	\$	3,500.47	\$	0.00	_	
E	List all may wall alady stiams.						-	
5.	List all payroll deductions:	_	•		•			
	5a. Tax, Medicare, and Social Security deductions	5a.	\$_	893.23	\$	0.00	_	
	5b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.00	-	
	5c. Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	-	
	5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	_	
	5e. Insurance	5e.	\$_	0.00	\$	0.00	_	
	5f. Domestic support obligations	5f.	\$_	0.00	\$	0.00	-	
	5g. Union dues	5g.	\$_	0.00		0.00	_	
_	5h. Other deductions. Specify:	5h.+	_		+ \$	0.00	-	
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	893.23	\$	0.00	-	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,607.24	\$	0.00	-	
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00		
	8b. Interest and dividends	8b.	\$	0.00	\$	0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$	0.00	-	
	8d. Unemployment compensation	8d.	\$	0.00	\$	0.00	_	
	8e. Social Security	8e.	\$	0.00	\$	0.00	_	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	0.00	-	
	8g. Pension or retirement income	8g.	\$_	0.00	\$	0.00	_	
	8h. Other monthly income. Specify: 1/12 of income tax refunds	8h.+	\$_	166.67	+ \$	0.00	-	
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	166.67	\$	0.00	0	
10.	Calculate monthly income. Add line 7 + line 9.	10. \$		2,773.91 + \$	0.0	00 = \$	2,773.91	
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			<u> </u>		<del></del>		
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00							
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ceapplies				a, if it	2. \$	2,773.91	
						Combin		
13.	Do you expect an increase or decrease within the year after you file this fo	rm?				monthly	y income	
	■ No.							
	Yes. Explain:							

SIII	in this informa	tion to identify yo	our caso:			I		
						Cha	and if their in	
Deb	tor 1	Donald Rich	ard Glas	pell, III		□ Che	eck if this is:  An amended filing	
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	wing postpetition chapter
` .	,							the following date.
Unit	ed States Bankr	ruptcy Court for the:	EASTE	RN DISTRICT OF MICHIG	AN		MM / DD / YYYY	
	e numbe <b>r</b> nown)							
		rm 106J	_					
		J: Your I			a filinan ta matham h	-41		12/1
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this t n.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to □ Yes. <b>Doe</b>	s Debtor 2 live i	in a separ	ate household?				
	□N	0	•					
	ΠY	es. Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								☐ Yes
								□ No
								Yes
								□ No □ Yes
3.	Do your exp	enses include	_	No				□ Yes
	expenses o	f people other tl	han $_{m \Box}$	Yes				
		d your depende	iito :					
exp	imate your ex	ate Your Ongoii openses as of your a date after the b	our bankrı	ly Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed the second	orm as a s e J, check t	supplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
the		h assistance and		government assistance it cluded it on <i>Schedule I: Y</i>			Your exp	enses
•		,						
4.		or home owners and any rent for the		ses for your residence. In or lot.	nclude first mortgag	e 4.	\$	0.00
	If not includ	led in line 4:						
		estate taxes				4a.	·	0.00
	•	rty, homeowner's				4b.	· ———	0.00
		maintenance, re owner's associat	•	upkeep expenses		4c. 4d.	:	95.00 0.00
5.				our residence, such as ho	me equity loans	4u. 5.		0.00

Official Form 106J Schedule J: Your Expenses 16-21725-dob Doc 1 Filed 09/27/16 Entered 09/27/16 11:37:39 Page 32 of 50

Official Form 106J Schedule J: Your Expenses 16-21725-dob Doc 1 Filed 09/27/16 Entered 09/27/16 11:37:39 Page 33 of 50

Fill in this inf	armatian to identify ye				
Debtor 1	ormation to identify yo				
Debior	Donald Richard	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the	e: EASTERN DISTRICT	OF MICHIGAN		
Case number					
(if known)					Check if this is an amended filing
Official Fo	orm 106Dec				
		an Individua	l Debtor's Sch	nedules	12/15
If two married	people are filing toget	ther, both are equally respe	onsible for supplying corre	ct information.	
V	(L) - (	Clark and more tax and a dealer		Walden a false atatamant a	
				Making a false statement, c fines up to \$250,000, or im	
	. 18 U.S.C. §§ 152, 134				p
s	ign Below				
Did you	pay or agree to pay so	meone who is NOT an atto	orney to help you fill out ba	nkruptcy forms?	
■ No					
— □ Yes	. Name of person			Attach Bankruptcy F	Petition Preparer's Notice,
_				Declaration, and Sig	gnature (Official Form 119)
	nalty of perjury, I declarate true and correct.	are that I have read the sur	nmary and schedules filed	with this declaration and	
X /s/ D	onald Richard Glas	pell, III	X		
	ald Richard Glaspell ature of Debtor 1	i, III	Signature of D	ebtor 2	
Date	September 27, 201	16	Date		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fill	in this inform	nation to identify you	r case:			
	otor 1	Donald Richard				
Der	3101 1	First Name	Middle Name	Last Name		
1	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
1	se number				-	heck if this is an mended filing
Sta Be a info	as complete a	of Financial and accurate as possiore space is needed,	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for supp additional pages, write you	
num	<u> </u>	n). Answer every ques Details About Your Ma	stion. arital Status and Where You	Lived Before		
1.		r current marital statu				
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out S <i>cl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		dar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$16,729.80	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

**Debtor 1 or Debtor 2 or both have primarily consumer debts.**During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount you paid

Still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Official Form 107

Address:

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Official Form 107

Person's relationship to you

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		payme	be any property or nts received or debts exchange	Date transfer was made			
	Howe Auto & Scrap Metal 3635 S Huron Road Bay City, MI 48706	1999 Dodge Cai \$300.00	ravan-	\$150.0	00 (scrap value)	April 2016			
	None								
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a	self-settled	I trust or similar device	of which you are a			
	Yes. Fill in the details.	Decementian and w	rolus of the man		iouud	Data Transfer was			
	Name of trust	Description and value of the property transferred			rerrea	Date Transfer was made			
Par	List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Sto	orage Units	3				
20.	Within 1 year before you filed for bankruptcy	, were any financial ac	counts or instru	ıments hel	d in your name, or for ye	our benefit, closed,			
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No								
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, an	y safe dep	osit box or other depos	tory for securities,			
	■ No								
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?			
22.	Have you stored property in a storage unit o	r place other than your	home within 1	year before	e you filed for bankrupto	y?			
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?			
Par	19: Identify Property You Hold or Control	for Someone Else							
23.	for someone.					or, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value			
Par	t 10: Give Details About Environmental Info	,							

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? п Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Part 12: Sign Below

Name

Address

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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**Date Issued** 

Debtor	1 Donald Richard Glaspell, III	Case number (if known)			
		se statement, concealing property, or obtaining money or property by fraud in connection			
	C. §§ 152, 1341, 1519, and 3571.	50,000, or imprisonment for up to 20 years, or both.			
/s/ Do	nald Richard Glaspell, III				
	d Richard Glaspell, III ure of Debtor 1	Signature of Debtor 2			
Date	September 27, 2016	Date			
Did you	ı attach additional pages to Your Statement	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?			
■ No					
☐ Yes					
Did you	ı pay or agree to pay someone who is not aı	n attorney to help you fill out bankruptcy forms?			
■ No					
☐ Yes.	No Yes. Name of Person Attach the <i>Bankruptcy Petition Preparer's Notice, Declaration, and Signature</i> (Official Form 119).				

# **United States Bankruptcy Court Eastern District of Michigan**

In re	Donald	Richard Gla	spell, III			Case No.	
				Debtor(s)		Chapter	13
				ENT OF ATTORNEY FOR SUANT TO F.R.BANKR.P.			
	The und	ersigned, pursu	ant to F.R.Bankr.P. 2016	5(b), states that:			
1.	The und	ersigned is the	attorney for the Debtor(s	s) in this case.			
2.	The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]						
	[ <b>X</b> ]	FLAT FEE					
	A.			nplation of and in connection v		3	,500.00
	B.	Prior to filing	g this statement, received	d			0.00
	C.	The unpaid b	valance due and payable i	is		3	,500.00
	[]	<u>RETAINER</u>					
	A.	Amount of re	etainer received				
	B.			e retainer at an hourly rate of \$ and expenses exceeding the			rly rate schedule.] Debtor(s) have
3.	\$ <u>310</u>	.00 of the fil	ing fee has been paid.				
4.		for the above-ont apply.]	disclosed fee, I have agre	eed to render legal service for	all aspects of the	e bankrupto	ey case, including: [Cross out any
	A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in						
	bankruptcy; B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;						
	C.			eeting of creditors and confirm			
	D. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;						
	E. Reaffirmations; F. Redemptions;						
	<del>G.</del> ——	-Other:-					
5.	By agree	A. Motions B. Motions C. All post- D. Adversa E. The profe	for relief from the aut to dismiss; confirmation profess ry proceeding(s) to st essional services des	ional services and costs;	; A), (B), (C) app	earing im	
6.	The sour	rce of payments	to the undersigned was				
	A. B.	XX		wages, compensation for service luding the identity of payor)	vices performed		
7.	The und		,	are, with any other person, oth	er than with mer	mbers of th	e undersigned's law firm or
Dated:	Septe	ember 27, 201	6		/s/ Joshua	M. Reiner	t
					Attorney for Joshua M. Reinert & R 3434 Daver Saginaw, N (989) 799-8	Reinert P leinert nport II 48602	
Agreed:	/s/ Do	onald Richard	Glaspell, III				
-	Dona	Id Richard G					
	Debto	r			Debtor		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# **United States Bankruptcy Court Eastern District of Michigan**

in re	Donaid Richard Glaspell, III				
		Debtor(s)	Chapter	13	
	VERI	FICATION OF CREDITOR N	MATRIX		
Γhe ab	ove-named Debtor hereby verifies t	hat the attached list of creditors is true and co	orrect to the best	of his/her knowledge.	
Date:	September 27, 2016	/s/ Donald Richard Glaspell, III			
		Signature of Debtor			

Advanced Diagnostic Imaging, P.C. P.O. Box 5987 Saginaw, MI 48603-0987

Bangor Medical Center 2520 N. Euclid Bay City, MI 48706

Byram Healthcare 3010 Woodcreek Drive, Suite A Downers Grove, IL 60515

Byram Healthcare 120 Bloomindale Road, Suite 301 White Plains, NY 10605-1518

Capital One P.O. Box 30281 Salt Lake City, UT 84130-0281

CBC Credit Services P.O. Box 3244 Saginaw, MI 48605

Citimortgage P.O. Box 6243 Sioux Falls, SD 57117-6243

Covenant 1447 N. Harrison Saginaw, MI 48602

Covenant Healthcare 1447 N. Harrison Saginaw, MI 48602

Covenant Healthcare P.O. Box 24807 Nashville, TN 37202

Covenant Medical Center P.O. Box 771799 Detroit, MI 48277

Credit Service of Michigan P.O. Box 6428 Saginaw, MI 48608

Credit Services of Michigan 1982 Hemmeter Saginaw, MI 48638

Credit Services of Michigan, Inc. P.O. Box 6428 Saginaw, MI 48608

Ditech
P.O. Box 0049
Palatine, IL 60055

Dr. Palaniandy Kogulan, MD 3785 Bay Road Saginaw, MI 48603

EM Med PC P.O. Box 12750 Oklahoma City, OK 73157

Flint Clinical Pathology 3490 Calkin Rd Flint, MI 48532

Freeland Foot & Ankle 7305 Midland Road Ste 2 Freeland, MI 48623

Huntington National Bank P.O. Box 1558 Columbus, OH 43216-1558

Michigan Department of Treasury Collection/Bankruptcy Unit P.O. Box 30168
Lansing, MI 48909

Money Recovery Nationwide 8155 Executive Court, Suite 10 Lansing, MI 48917 Oakland Orthopedic 2456 22nd Street Bay City, MI 48708

Russel Collection G3285 Van Slyke Rd. Flint, MI 48507

Stephen Steinour, CEO
The Huntington National Bank, Inc.
Huntington Center
41 S. High St.
Columbus, OH 43287

Traci Delgado 423 E. Portage Avenue Sault Sainte Marie, MI 49783